



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)

Indiana Election Commission (IC 3-9-5-14)

(CFA-4)
Summary Sheet

FILE NUMBER

3979

TOTAL PAGES IN ENTIRE CFA-4 REPORT

3

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☒ No

COMMITTEE INFORMATION

1. Full name of committee (as on Statement of Organization) ☐ Check if this is a new name

FRATERNAL ORDER OF POLICE LODGE 86 PAC

2. Acronym or abbreviated name, if any

3. Committee telephone number

(317) 637-1195

4. Mailing address (address where all campaign finance correspondence is received) ☐ Check if this is a new address

1427 E. Washington Street

5. City, state, ZIP code

Indianapolis IN 46201

6. Party affiliation (if applicable)

CANDIDATE INFORMATION (For Candidate's Committee Only)

7. Full name of candidate (include any nickname)

8. Party affiliation or if independent

9. Office sought (include district number, if any **Not required for exploratory committee.**)

10. County of residence

TYPE OF REPORT

CONVENTION CANDIDATES ONLY

11.
Annual

12. Check one:

☐ Pre-Convention☐ Post-Convention

12. Reporting period

From: 10/11/2008

Through: 12/31/2008

COLUMN A
This PeriodCOLUMN B
Year to Date

13. Cash on hand and investments at the beginning of this reporting period.

1,575.48

14. Cash on hand and investments January 1, current year.

1,022.73

CONTRIBUTIONS AND RECEIPTS

(Note: These amounts include in-kind contributions and loans, as well as cash contributions.)

15a. Itemized (use Schedule A)

2,039.11

5,598.11

15b. Unitemized

5.90

5.90

15c. Add lines 15a, and 15b in both columns

SUBTOTAL

2,045.01

5,604.01

16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B

TOTAL

3,620.49

6,626.74

EXPENDITURES

(Note: These amounts include in-kind expenditures and loan repayments.)

17a. Itemized (use Schedule B) (Public Question: use Schedule C)

600.00

3,606.25

17b. Unitemized

0.00

0.00

17c. Add lines 17a and 17b in both columns

SUBTOTAL

600.00

3,606.25

18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)

TOTAL

3,020.49

3,020.49

19. Debts OWED BY the committee (use Schedule D)

0.00

20. Debts OWED TO the committee (use Schedule E)

0.00

CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE.

Signature of Treasurer

Title

Date

Signature of Candidate (if applicable)

Date

FOR OFFICE USE ONLY

Filed: Online

1/19/09 6:45 pm

Elizabeth A. White

MAR 11 2009

FILED

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D Felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B Misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-16, 3-9-4-17, 3-9-4-18.)



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**(CFA-4 SCHEDULE A-1)
CONTRIBUTIONS BY INDIVIDUALS
Itemized Contributions and Other
Receipts**

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly, **IN BLACK INK** all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200 if regular party committee). All cumulative receipts (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) **OVER \$100** per contributor, within a calendar year **MUST** be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state ZIP code)		TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1 Payroll Contributions 1427 E. Washington Street Indianapolis IN 46201 Contributor's Occupation (if required): public safety officers		Contribution: Direct	2,039.11	5,598.11	12/31/2008
					DONNA SHAUMBAUGH
SUB TOTAL THIS PAGE OF SCHEDULE A			\$ 2,039.11		
TOTAL OF ALL PAGES OF SCHEDULE A ON THE LAST PAGE ONLY (Enter total on ITEM 15a of the Summary Sheet)			\$ 2,039.11		



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**(CFA-4 SCHEDULE B)
Itemized Expenditures**

INSTRUCTIONS: Please type or print legibly in **BLACK INK** all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaling on **ITEM 17a** of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities **OVER \$100** per recipient within a calendar year **MUST** be itemized on this schedule (over \$200 if regular party committee). All cumulative expenses, including in-kind, **regardless of amount paid** to political committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) **MUST** be itemized on this schedule.

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
Code: Contributions 1 JOHN ELROD 5329 S EMERSON AVE STE C INDIANAPOLIS IN 46237		Direct Purpose: CONTRIBUTION	300.00	300.00	10/20/2008
Code: Contributions 2 SWATTS, CHRIS STREET INDIANAPOLIS IN 46204		Direct Purpose: CONTRIBUTION	300.00	300.00	10/20/2008
SUB TOTAL THIS PAGE OF SCHEDULE B			\$ 600.00		
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)			\$ 600.00		

Certified this 12th day of March, 2009
Donna L Shambaugh

